|                                                          | Ŭ REPO                          | RT OF LOBBYIST E                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | EMPLOYE     | R                                     |                                            |
|----------------------------------------------------------|---------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|---------------------------------------|--------------------------------------------|
|                                                          | (G                              | overnment Code Sectio                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | n 86116)    |                                       | 1/9                                        |
|                                                          |                                 | or                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |             |                                       | 1                                          |
|                                                          |                                 | RT OF LOBBYING (al. Code of Regs. Section                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |             | N                                     |                                            |
| FORM 625                                                 | (2.0)                           | ai. Code of Negs. Section                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 11 10010.4) |                                       |                                            |
| FORM 635<br>1993                                         |                                 | NT: Lobbying Coalition bleted Form 635-C to the state of |             | ach a                                 |                                            |
| ı                                                        | REPORT COVERS PER               | 01/01/2022                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | THROUG      | H 03/31/2022                          | FOR OFFICIAL USE ONLY                      |
|                                                          | CUMULATIVE PERIOD               | BEGINNING                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 01/01/2021  |                                       | A                                          |
| For information required to<br>Manual on Lobbying Disclo |                                 | TYPE OR PRINT IN Int to the Information Practices ical Reform Act.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |             | e I <u>nformation</u>                 | В                                          |
| NAME OF FILER:                                           |                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |             |                                       |                                            |
| Sempra Energy and its A                                  | Affiliates San Diego Gas        | & Electric and So. Cal. Ga                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | s Co.       |                                       |                                            |
| BUSINESS ADDRESS: (Numb                                  | per and Street)                 | (City)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | (State)     | (Zip Code)                            | TELEPHONE NUMBER:                          |
|                                                          |                                 | San Diego                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | CA          | 92101                                 |                                            |
| PART I - LEGISLATIVE<br>(See instructions on reverse     |                                 | ADMINISTRATIVE ACTION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | NS ACTIVELY | LOBBIED DURIN                         | G THE PERIOD                               |
| X If more space is needed                                | d, check box and attach continu | SUMMARY OF PAYME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | NTS THIS P  | ERIOD                                 |                                            |
| A. Total Payments to Ir                                  | n-House Employee Lobbyis        | ts (Part III, Section A, Column                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 1)          | \$                                    | 168094.54                                  |
| B. Total Payments to L                                   | obbying Firms (Part III, Sec    | tion B, Column 4)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |             | \$                                    | 176000.00                                  |
| C. Total Activity Expens                                 | ses (Part III, Section C)       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |             | \$                                    | 1040.00                                    |
| D. Total Other Paymen                                    | ts to Influence (Part III, Sec  | ction D)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |             | \$                                    | 1616043.85                                 |
| GRAND TO                                                 | TAL (A + B + C + D abo          | ve)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |             | \$                                    | 1961178.39                                 |
| E. Total Payments in C                                   | onnection with PUC Activiti     | es (Part III, Section E)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |             | \$                                    | 14097.43                                   |
| F. Campaign Contributi                                   | ons: X Part IV compl            | eted and attached                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | ☐ No cam    | npaign contributions m                | ade this period                            |
|                                                          |                                 | VERIFICATI                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ON          |                                       |                                            |
| tion contained h                                         | erein and in the attached       | eparing this Report. I have schedules is true and compe laws of the State of Califor                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | lete.       |                                       | st of my knowledge the informa-<br>orrect. |
| Executed on (Date)<br>05/02/2022                         |                                 | At (City and State)<br>San Diego,CA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |             | By (Signature of Em<br>Ms. Lisa Alexa | ployer or Responsible Officer)<br>ander    |
| Name of Employer or Respons<br>Ms. Lisa Alexander        | ible Officer (Type or Print)    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |             | Title<br>SVP Corporate                | Affairs                                    |

PERIOD COVERED: 01/01/2022 03/31/2022

NAME OF FILER: Sempra Energy and its Affiliates San Diego Gas & Electric and So. Cal. Gas Co.

| PART II - PARTNERS, OWNERS, AND EMPI<br>REPORT (See instructions on reverse.)                                                          |                            | E "LOBBAIST KI                                                   | EPORTS" (FORM 615) ARE                              | : AI | TACHED TO                   | THIS                               |  |  |
|----------------------------------------------------------------------------------------------------------------------------------------|----------------------------|------------------------------------------------------------------|-----------------------------------------------------|------|-----------------------------|------------------------------------|--|--|
| Name and Title N                                                                                                                       |                            |                                                                  | Name and Title                                      |      |                             |                                    |  |  |
| Employee<br>Israel Salas<br>Government Affairs Manager                                                                                 |                            | Employee<br>Ms. Nico<br>Governme                                 | ellina Hernandez<br>ent Affairs Manager             |      |                             |                                    |  |  |
| Employee<br>Ms. Lourdes Jimenez<br>Government Affairs Manager                                                                          |                            |                                                                  |                                                     |      |                             |                                    |  |  |
|                                                                                                                                        |                            |                                                                  |                                                     |      |                             |                                    |  |  |
|                                                                                                                                        |                            |                                                                  |                                                     |      |                             |                                    |  |  |
|                                                                                                                                        |                            |                                                                  |                                                     |      |                             |                                    |  |  |
| If more space is needed, check box and attach continu                                                                                  | ation sheets.              |                                                                  |                                                     |      |                             |                                    |  |  |
| PART III - PAYMENTS MADE IN CONNECTION                                                                                                 | ON WITH LOBB               | SYING ACTIVITIE                                                  | s                                                   |      |                             |                                    |  |  |
| A. PAYMENTS TO IN-HOUSE EMPLOYEE (See instructions on reverse. Also enter the Amount (Column 1) on Line A of the Summary of Payments s | This Period                |                                                                  | (1)<br>Amount This<br>Period                        |      | (2<br>Cumulati<br>To I      |                                    |  |  |
| (1111)                                                                                                                                 | 1.0.                       |                                                                  | \$ 168094.54                                        |      | \$ 72                       | 9520.97                            |  |  |
| B. PAYMENTS TO LOBBYING FIRMS (Inc                                                                                                     | cluding Individual (       | Contract Lobbyists)                                              |                                                     |      |                             |                                    |  |  |
| Name and Address of Lobbying<br>Firm/Independent Contractor                                                                            | (1)<br>Fees &<br>Retainers | (2)<br>Reimbursements<br>of Expenses                             | (3) Advances or Other Payments (attach explanation) |      | (4)<br>Total<br>This Period | (5)<br>Cumulative<br>Total to Date |  |  |
| California Strategies & Advocacy LLC                                                                                                   | 22500.00                   | 0.00                                                             | 0.00                                                | 2    | 22500.00                    | 99000.00                           |  |  |
| Sacramento CA 95814 Campbell Strategy & Advocacy,LLC                                                                                   | 18000.00                   | 0.00                                                             | 0.00                                                | ,    | 18000.00                    | 126000.00                          |  |  |
| Sacramento CA 95814 CAPITOL STRATEGIES GROUP,INC. Sacramento CA 95814                                                                  | 36000.00                   | 0.00                                                             | 0.00                                                | 3    | 36000.00                    | 153000.00                          |  |  |
| CRUZ STRATEGIES                                                                                                                        | 33000.00                   | 0.00                                                             | 0.00                                                | 3    | 33000.00                    | 149000.00                          |  |  |
| SACRAMENTO CA 95814 Prime Strategies of California                                                                                     | 34500.00                   | 0.00                                                             | 0.00                                                | 3    | 34500.00                    | 147000.00                          |  |  |
| Sacramento CA 95814  If more space is needed, check box and attach continuation sheets                                                 | Also ent                   | . THIS PERIOD (<br>ter the total of Colur<br>ry of Payments sect | nn 4 on Line B of the                               | \$   | 176000.0                    | 00                                 |  |  |

PERIOD COVERED: 01/01/2022 03/31/2022

NAME OF FILER: Sempra Energy and its Affiliates San Diego Gas & Electric and So. Cal. Gas Co.

| C. ACTI    | VITY EXPENSES (See instructions on re                                                                    | <u>,                                      </u>                              |                  | T                                                                                                                 | 1                              |
|------------|----------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------|------------------|-------------------------------------------------------------------------------------------------------------------|--------------------------------|
| Date       | Name and Address of Payee                                                                                | Name and Official Posit<br>of Reportable Persons a<br>Amount Benefiting Ead | and              | Description of<br>Consideration                                                                                   | Total<br>Amount<br>of Activity |
| 03/25/2022 | San Diego Padres                                                                                         | Heath Flora  Assemblymember - District 12                                   | \$20.00<br>Other | SDG&E/Sempra -<br>portion of hotel r -<br>oom provided for<br>San Diego Padres<br>spring training w -<br>eekend.  | \$ 520.00                      |
|            | San Diego CA 92101                                                                                       |                                                                             |                  | ochona.                                                                                                           |                                |
| 03/25/2022 | San Diego Padres                                                                                         | Jim Cooper                                                                  | Other 520.00     | SDG&E/Sempra -<br>portion of hotel r -<br>oom provided for<br>San Diego spring<br>training weekend                | 520.00                         |
|            | San Diego CA 92101                                                                                       | Assemblymember - District 9                                                 |                  | training weekend                                                                                                  |                                |
|            |                                                                                                          |                                                                             |                  |                                                                                                                   |                                |
|            |                                                                                                          |                                                                             |                  |                                                                                                                   |                                |
|            |                                                                                                          |                                                                             |                  |                                                                                                                   |                                |
|            |                                                                                                          |                                                                             |                  |                                                                                                                   |                                |
|            |                                                                                                          |                                                                             |                  |                                                                                                                   |                                |
|            |                                                                                                          |                                                                             |                  |                                                                                                                   |                                |
|            | ore space is needed, check box and attach tinuation sheets.                                              | A                                                                           |                  | Activity Expenses) Section C on Line C of lents section on page 1.                                                | \$ 1040.00                     |
| X NOT      | IER PAYMENTS TO INFLUENCE LE E: State and local government agencies c                                    |                                                                             |                  |                                                                                                                   |                                |
| 1. F       | PAYMENTS TO LOBBYING COALITIONS<br>Form 630 to this Report.)                                             | (NOTE: You must attach a completed                                          |                  | \$ <u>0.00</u><br><b>\$</b> 616043.85                                                                             |                                |
| 2. (       | OTHER PAYMENTS                                                                                           |                                                                             |                  | TOTAL SECTION D (1 + 2) Also enter the total of Section D on Line D of the Summary of Payments section on page 1. | \$1616043.85                   |
| BEF        | MENTS IN CONNECTION WITH AD ORE THE CALIFORNIA PUBLIC UT nary of Payments section on page 1. (See instru | TILITIES COMMISSION Also, enter the                                         | ATEMAKING PR     |                                                                                                                   | \$ 14097.43                    |

|                | - 04/04/0000                   | 00/04/0000                       |                  |  |
|----------------|--------------------------------|----------------------------------|------------------|--|
| PERIOD COVERE  | D: <u>01/01/2022</u>           | 03/31/2022                       | _                |  |
| NAME OF FILER: | Sempra Energy and its Affiliat | tes San Diego Gas & Electric and | So. Cal. Gas Co. |  |

| <b>PART IV CAMPAIGN CONTRIBUTIONS MADE</b> (Monetary and non-monetary campaign made to or on behalf of <u>state</u> candidates, elected state officers and any of their controlled committees, or candidates or officers must be reported in A or B below.)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                  |        |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------|--------|
| A. If the contributions made by you during the period covered by this report, or by a common in a campaign disclosure statement which is on file with the Secretary of State, report to identification number, if any, below.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                  |        |
| тания от таки и | ntification Number if cipient Committee: - npany | 488235 |

B. Contributions of \$100 or more which have not been reported on a campaign disclosure statement, including contributions made by an organization's sponsored committee, must be itemized below.

| Date       | Name of Recipient                    | I.D. Number if<br>Committee |    | Amount  |
|------------|--------------------------------------|-----------------------------|----|---------|
| 01/28/2022 | Laurie Davies for Assembly 2022      | 1435669                     | \$ | 2000.00 |
| 03/07/2022 | Laurie Davies for Assembly 2022      | 1435669                     | \$ | 2900.00 |
| 03/07/2022 | Vince Fong for Assembly 2022         | 1435504                     | \$ | 1500.00 |
| 03/21/2022 | Robert Wieckowski for Assembly 2024  | 1436033                     | \$ | 1900.00 |
| 03/21/2022 | Robert Wieckowski for Assembly 2024  | 1436033                     | \$ | 600.00  |
| 03/21/2022 | Rosilicie Ochoa Bogh for Senate 2024 | 1435065                     | \$ | 2900.00 |
|            |                                      |                             | \$ |         |
|            |                                      |                             | \$ |         |
|            |                                      |                             | \$ |         |
|            |                                      |                             | \$ |         |
|            |                                      | •                           | •  |         |

If more space is needed, check box and attach continuation sheets.

PERIOD COVERED:

01/01/2022

03/31/2022

NAME OF FILER: Sempra Energy and its Affiliates San Diego Gas & Electric and So. Cal. Gas Co.

#### PART III - PAYMENTS MADE IN CONNECTION WITH LOBBYING ACTIVITIES B. PAYMENTS TO LOBBYING FIRMS (Including Individual Contract Lobbyists) (1) (2) (3) (4) (5) Advances or Name and Address of Lobbying Fees & Reimbursements Total Cumulative Other Payments Firm/Independent Contractor Retainers of Expenses This Period Total to Date (attach explanation) 0.00 Kester/Pahos 32000.00 0.00 32000.00 128000.00 Sacramento CA 95814

TOTAL THIS PERIOD (Column 4) Also enter the total of Column 4 on Line B of the Summary of Payments section on page 1.

\$176000.00

### **Attachment Form 640**

(Attachment to Form 635 or Form 645)

CALIFORNIA
1993 FORM
640

6/9

PERIOD COVERED: <u>01/01/2022 -- 03/31/2022</u>

NAME OF FILER: Sempra Energy and its Affiliates San Diego Gas & Electric and So. Cal. Gas Co.

**For Use By:** A state or local government agency that qualifies as a lobbyist employer or a \$5,000 filer. Refer to the instructions on the cover page before completing this attachment.

#### Other Payments to Influence Legislative or Administrative Action: 1. Total payments for overhead expenses related to lobbying activity. 10108.98 Report as a lump sum. 0.00 2. Total payments to Lobbying Coalitions. Report as a lump sum. (Form 630 must be attached) Total payments of less than \$250 during the calendar quarter for lobbying 8469.37 activity (excluding overhead). Report as a lump sum. 4. Total payments of more than \$250 during the calendar quarter for lobbying 1597465.50 activity (excluding overhead). Such payments must be itemized below. ..... Grand total of "Other Payments to Influence Legislative or Administrative 1616043.85 Action." Also enter this total on the appropriate line of the Summary of Payments section on Page 1 of Form 635 or Form 645.

Itemize below payments of \$250 or more made during the quarter for lobbying activity. Provide the name and address of the payee, the amount paid during the quarter, and the cumulative amount paid to the payee since January 1 of the biennial legislative session covered by the report.

Also itemize dues or similar payments of \$250 or more made to an organization that makes expenditures equal to 10% of its total expenditures or \$15,000 or more in a calendar quarter to influence legislative or administrative action. Provide the organization's name and address, the amount paid to the organization during the quarter, and the cumulative amount paid to the organization since January 1 of the biennial legislative session covered by the report.

| Name & Address of Payee                              | Amount This<br>Quarter | С  | Cumulative Amount<br>Since January 1 |
|------------------------------------------------------|------------------------|----|--------------------------------------|
| [E] - Sempra Expenses Related to Lobbying Activities | \$<br>1892.37          | \$ | 3785.01                              |
| San Diego CA 92101                                   |                        |    |                                      |
| [S] - Loren Logan                                    | \$<br>14480.75         | \$ | 26990.10                             |
| San Diego CA 92123                                   |                        |    |                                      |
| [S] - Andy Carrasco                                  | \$<br>3317.31          | \$ | 3317.31                              |
| Los Angeles CA 90013                                 |                        |    |                                      |
| Subtotal of all payments itemized above              | \$<br>19690.43         |    |                                      |
| y If more space is needed, check box and attach      |                        |    |                                      |

X If more space is needed, check box and attach continuation sheets.

# **Attachment Form 640**

(Continuation Sheet)

CALIFORNIA
1993 FORM
640

7/9

PERIOD COVERED: <u>01/01/2022--03/31/2022</u>

NAME OF FILER: Sempra Energy and its Affiliates San Diego Gas & Electric and So. Cal. Gas Co.

| Name & Address of Payee           | Amount This<br>Quarter | Cumulative Amount Since January 1 Biennial Legislative Session |
|-----------------------------------|------------------------|----------------------------------------------------------------|
| [P] - Bicker Castillo & Fairbanks | 97711.30               | 205435.02                                                      |
| Sacramento CA 95814               |                        |                                                                |
| [S] - Kent Kauss                  | 2782.69                | 2782.69                                                        |
| Sacramento CA 95814               |                        |                                                                |
| [S] - Scott Crider                | 2596.25                | 5131.61                                                        |
| San Diego 92123                   |                        |                                                                |
| [S] - Jennifer Lu                 | 5774.98                | 11355.03                                                       |
| Los Angeles CA 90013              |                        |                                                                |
| [S] Jill Tracy                    | 2746.83                | 2746.83                                                        |
| Los Angeles CA 90013              |                        |                                                                |
| [S] Neil Navin                    | 5362.67                | 5362.67                                                        |
| Los Angeles CA 90013              |                        |                                                                |
| [S] Maryam Brown                  | 14939.71               | 14939.71                                                       |
| Los Angeles CA 90013              |                        |                                                                |
| [A] Stafford Multimedia LLC       | 1384192.00             | 1384192.00                                                     |
| Whitefish MT 59937                |                        |                                                                |
| [S] Frank Lopez                   | 6703.50                | 6703.50                                                        |
| Los Angeles CA 90013              |                        |                                                                |
| Subtotal of all payments item     | \$ 1522809.93          |                                                                |

## **Attachment Form 640**

(Continuation Sheet)

CALIFORNIA
1993 FORM
640

8/9

PERIOD COVERED: <u>01/01/2022--03/31/2022</u>

NAME OF FILER: Sempra Energy and its Affiliates San Diego Gas & Electric and So. Cal. Gas Co.

| Name & Address of Payee | Amount This<br>Quarter | Cumulative Amount Since January 1 Biennial Legislative Session |
|-------------------------|------------------------|----------------------------------------------------------------|
| [S] - Christina Chase   | 23327.83               | 23327.83                                                       |
| San Diego CA 92123      |                        |                                                                |
| [S] - Rina Padula       | 7505.53                | 7505.53                                                        |
| Los Angeles CA 90013    |                        |                                                                |
| [S] - Kevin Barker      | 2700.65                | 2700.65                                                        |
| Los Angeles CA 90013    |                        |                                                                |
| [S] - Evelyn Loya       | 3980.05                | 3980.05                                                        |
| Los Angeles CA 90013    |                        |                                                                |
| [S] - Vageha Khan       | 4152.08                | 4152.08                                                        |
| Los Angeles CA 90013    |                        |                                                                |
| [S] - Ann Ayres         | 13299.00               | 13299.00                                                       |
| Los Angeles CA 90013    |                        |                                                                |

Subtotal of all payments itemized above

54965.14

\$

# **TEXT ANNOTATION**

### PAGE 1

Schedule F635 Reference No:

Assembly Bills:769,847,1395,1471,1531,1780,1814,1960,2302,2316,2399,2674,2696,2765,2802,2838,2937,2944,1676,1694,1738,1890,1-993,2061,2070,2075,2083,2143,2204,2243,2490,2578,2562,2587,2649,2700,2703,2793,2797,2864,2871,2874,2878,2889,2891,2911, Sen-ate Bill:529,599,612,884,1075,1101,1329,1345,1347,1376,1385,1391,1393,1399,1463,1482,1486,18,296,542,746,833,839,881,887,896,9-05,926,1020,1026,1032,1063,1101,1109,1112,1119,1158,1164,1173,1174,1208,1230,1235,1287,1291,1297,1383 Offices Lobbied: Gover-norb